

Connecticut Food Policy Council  
Nutrition Access through Healthcare Working Group  
Draft Meeting Minutes  
Wednesday, February 11th, 2015

**Attendees**

Lucy Nolan, (EHC!/Vice Chair); Martha Page (HFS); Marcia Maillard (DPH); Jessica Mahon (EHC!); Peggy Zamore, (DFMCC); Leah Tully (CHACT); Marydale Debor (Fresh Advantage)

The meeting was called to order at 11:00

**Background of Community Health Needs Assessment**

Marydale Debor gave a brief history on the CHNA and how the ACA enactment came to be. Among other issues that brought about new regulations, one involved low level commitment towards community benefit from hospitals. Action was taken to boost the community benefit requirement for hospitals by putting in place a community health needs assessment requirement for a 3 year regulatory cycle. The ruling by the ACA also included a required implementation process to address needs identified in the assessment that must be done annually. This new ACA ruling received many public health comments, 1/3 of those comments came from a coalition of advocates organized by Marydale Debor. The overall message of those comments was to recommend the prioritization of “the need to prevent illness, to ensure adequate nutrition, or to address social, behavioral, and environmental factors that influence health in the community.” For those involved in food systems work, this is an opportunity to advocate at the local level and become involved in the process.

**Approaching Hospitals / Local Advocacy**

Many CT hospitals are due for another CHNA this year, so an audit of all the hospitals in CT and when they conducted their last CHNA would be helpful as well as an inventory of their program interventions. Getting involved in the evaluation process may prove beneficial for local non-profits because hospitals may not want to invest in contracting out for evaluative services. Other examples of local advocacy would be to gather advocacy groups in various communities to make a larger impact when approaching hospitals, educate hospitals in Hunger 101, and brief them on community benefits within your community.

**CFPC to Host A Conference**

It was suggested that CFPC can hold an all day conference that would bring all the necessary stakeholders in one setting to identify key roles and relationships that can be formed to optimize results. Necessary stakeholders may include local food policy councils, hospitals, local health departments, and other interested non-profit agencies. The conference may also be an opportunity to acquaint groups with tools and data that will be beneficial to the assessment and implementation process.

With this year being the year where most CT hospitals must conduct a new CHNA, it would be beneficial to have the conference as soon as possible. The subcommittee as well as the CFPC will discuss any other details that must be further discussed to plan the event.

**Meeting was adjourned at 12:30pm**